

Atty. Dkt. No. 040675-0420

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

James G. Stanley

Title:

METHOD OF ATTACHING A SEAT BELT TO

A SEAT BELT TENSION SENSOR.

Appl. No.:

10/604,319

Filing Date:

July 10, 2003

Examiner:

David R. Dunn

Art Unit:

3616

## **AMENDMENT TRANSMITTAL**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment (10 pp) in the above-identified application.

- Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [X] Petition to Revive (2 pp)
- [X] IDS with Form PTO/SB/08 and 3 refs attached
- [ ] Assertion of Small Entity status is enclosed.
- [X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate	Additional Claims Fee
Total Claims:	19		24		0	X	\$50.00 =	\$0.00
Independent Claims:	8	-	3	=	5	x	\$200.00 =	\$1000.00

First presentation of any Multiple Dependent Claims: + \$360	0.00 =	\$0.00
CLAIMS FEE TO	AL =	\$1000.00

[ ] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[ ] Extension for response filed within the first month:	\$120.00	\$0.00
[ ] Extension for response filed within the second month:	\$450.00	\$0.00
[ ] Extension for response filed within the third month:	\$1,020.00	\$0.00
[ ] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
[ ] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION	FEE TOTAL:	\$0.00
[ ] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER	FEE TOTAL:	\$1000.00
] Small Entity Fees Apply (subtract ½ of above):		\$0.00
	TOTAL FEE:	\$1000.00

- [ ] Please charge Deposit Account No. 19-0741 in the amount of \$00.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$2,680.00 is enclosed (Petition to Revive Fee; Additional Claim Fee and IDS fee).
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

5/11/2005

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By

Howard N. Shipley Attorney for Applicant

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